

| POSITION                  | INITIALS | ID NO. | DATE      |
|---------------------------|----------|--------|-----------|
| FEE DETERMINATION         | rw       | 68904  | 1/18/00   |
| O.I.P.E. CLASSIFIER       |          | 16     | 2/3/00    |
| FORMALITY REVIEW          | rw       | 67177  | 2/8/00    |
| RESPONSE FORMALITY REVIEW |          | 67079  | - 1/18/00 |

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral) ... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

| Claim          | Date  |
|----------------|-------|
| Final Original | 12/01 |
| 11 ✓ ✓         | 12/10 |
| 2 ✓ ✓          | 12/01 |
| 3 ✓ ✓          |       |
| 4 ✓ ✓          |       |
| 5 ✓ ✓          |       |
| 6 ✓ ✓          |       |
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| Claim          | Date |
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| Final Original | 51   |
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| Claim          | Date |
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| Final Original | 101  |
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*RESPONSIBLE COPY*

If more than 150 claims or 10 actions  
staple additional sheet here

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